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CONFIRMATION NO. 9591

SERIAL NUMBER 10/810,653	FILING OR 371(c) DATE 03/29/2004 RULE	CLASS 514	GROUP ART UNIT 1647	ATTORNEY DOCKET NO. EIS-SCHWARTZ=2B
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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/893,348 06/28/2001 ABN which is a CIP of 09/314,161 05/19/1999 ABN  
 which is a CIP of PCT/US98/14715 07/21/1998  
 and is a CIP of 09/218,277 12/22/1998 ABN

Bob 3/30/07

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

ISRAEL 124500 05/19/1998  
 ISRAEL IL 124550 05/19/1998

Bob 3/30/07

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 09/09/2004

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after	ISRAEL	30	16	2
Verified and Acknowledged	<i>Budget E. Gunner</i> <i>Bob</i> Examiner's Signature Initials				

## ADDRESS

1444

## TITLE

Method for reducing neuronal degeneration so as to ameliorate the effects of injury or disease

FILING FEE RECEIVED 1060	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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